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APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	NTOR	FOR ATTORNI		RNEY DOCKET NO.	CONFIRMATION NO.	
10/642,794		Karen M. Braun D/A2068 3114				3114			
TITLE OF INVENTION: METHOD FOR DETERMINING A HUE ADJUSTMENT TO AN INPUT HUE									
			×X						
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE I	DUE P	REV. PAID ISSUE	FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	\$300		\$0		\$1700	04/18/2007	
EXAMINER		ART UNIT	CLASS-SUBCLAS	SS					
COUSO, YON JUNG 2624			382-167000						
1. Change of correspond CFR 1.363).		2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys  1							
Change of corresp Address form PTO/SI	e or agents OR, alte	or agents OR, alternatively,							
"Fee Address" ind PTO/SB/47; Rev 03-0 Number is required.	registered attorne 2 registered paten listed, no name w	(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.									
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
Yerox Corporation Stamford, Connecticut									
Please check the appropriate assignee category or categories (will not be printed on the patent):   Individual Corporation or other private group entity   Government									
4a. The following fee(s) are submitted:  4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)									
Issue Fee	A check is enclo	A check is enclosed.							
Publication Fee (1	_^ ′	Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any							
Advance Order -	overpayment, to	overpayment, to Deposit Account Number 24-0031 (enclose an extra copy of this form).							
	itus (from status indicate as SMALL ENTITY stat		☐ b. Applicant is n	no longer	r claiming SMAI	LL ENT	ΓΙΤΥ status. See 37 CF	R 1.27(g)(2).	
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	10	2/6.1			D. 2	2	January	2007	
Authorized Signature	Michael	Nickord					· ·		
Typed or printed name Michael J. Nickerson Registration No. 33, 265  This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process)									
This collection of inform an application. Confiden	nation is required by 37 ( itiality is governed by 35	CFR 1.311. The inform U.S.C. 122 and 37 C	nation is required to obtai FR 1.14. This collection	in or reta	ain a benefit by thated to take 12 r	ne publ ninutes	ic which is to file (and it to complete, including	g gathering, preparing, and	

an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFK 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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